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CONFIRMATION NO. 8271

Bib Data Sheet

SERIAL NUMBER 10/800,297	FILING OR 371(c) DATE 03/11/2004 RULE	CLASS 455	GROUP ART UNIT 2617	ATTORNEY DOCKET NO. PA2623US
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APPLICANTS

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** CONTINUING DATA *Un*** FOREIGN APPLICATIONS *N.m*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED **

05/28/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY GA	SHEETS DRAWING 5	TOTAL CLAIMS <i>220</i>	INDEPENDENT CLAIMS 4
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged <i>Un</i> Examiner's Signature <i>cr</i> Initials				

ADDRESS

22830

TITLE

Switch-based C/I measurement

FILING FEE RECEIVED 892	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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